

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 600358 RECEIPT DATE: 07 / 14 / 00
IA NUMBER: PCT/ CA99 / 00038 IA FILING DATE: 01 / 18 / 99
FAMILY NAME: ROIFMAN DELAY WAIVED (Y/N): Y
GIVEN NAME: CHAIM M DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 01 / 16 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 3477-88 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

NAME: KAREN A MAGGI

STREET: PO BOX 37428

CITY: RALEIGH

STATE/COUNTRY: NC ZIP: 27627

EMAIL:

APPLICATION TITLES:

HUMAN LYMPHOID PROTEIN IN TYROSINE PHOSPHATASES

TAB TO LAST POSITION,PUSH SEND